

**FEC FORM 9
24 HOUR NOTICE OF DISBURSEMENTS/OBLIGATIONS FOR
ELECTIONEERING COMMUNICATIONS**

1. Individual, Organization or Qualified Nonprofit Corporation Making the Disbursement/Obligations

(a) Name

National Federation of Independent Business

(b) Address (number and street) check if different than previously reported

1201 F Street NW

(c) City, State and ZIP Code

Washington

DC

20004

2. FEC Identification Number

C C00000000

(d) Name of Employer or Principal Place of Business

(e) Occupation

Lobbying

3. Is This Statement

New

or

Amended

4. Covering Period

M M / D D / Y Y Y Y
10 / 22 / 2008

through

M M / D D / Y Y Y Y
11 / 01 / 2008

5. (a) Date of Public Distribution(s) M M / D D / Y Y Y Y

(b) Communication Title Card Check

6. The filer is a(n): (a) Individual (b) Unincorporated Organization (c) Qualified Nonprofit Corporation (11 CFR 114.10)

(d) Corporation, Labor Organization or Qualified Nonprofit Corporation making communications under 11 CFR 114.15

(e) Other, specify: _____

7. Were the disbursements for the electioneering communication made exclusively from donations to a segregated bank account?

Yes

No

8. Custodian of Records

(a) Name

Michael Maloney

(b) Address (number and street)

1201 F Street NW

(c) City, State and ZIP Code

Washington

DC

20004

(d) Name of Employer or Principal Place of Business

Natl Fed of Independent Business

(e) Occupation

Director of Compliance

9. Total Donations This Statement

.00

10. Total Disbursements/Obligations This Statement

60675.00

Under penalty of perjury, I certify that this statement is true, correct and complete.

TYPE OR PRINT NAME OF PERSON COMPLETING FORM

Michael Maloney

SIGNATURE Electronically Filed by Michael Maloney

DATE 10/23/2008

NOTE: Submission of false, erroneous or incomplete information may subject the person signing this statement to the penalties of 2 U.S.C. 437g.

28039890586

**SCHEDULE 9-B
Disbursement(s) Made or Obligations**

28039890587

A. Full Name (Last, First, Middle Initial) of Payee BrabenderCox			Date of Disbursement or Obligation M M / D D / Y Y Y Y 10 / 22 / 2008		
Mailing Address of Payee 1218 Grandview Avenue			Amount 60675.00		
City Pittsburgh	State PA	Zip Code 15211	Communication Date M M / D D / Y Y Y Y 10 / 22 / 2008		
Name of Employer		Occupation	Transaction ID : F93.000001		

Purpose of Disbursement (including title(s) of communication(s))
Radio Advertising

Name of Federal Candidate Bruce Lunsford	Office Sought: House <input checked="" type="checkbox"/> Senate President	State: KY District: 00	Disbursement/Obligation For: 2008 Primary <input checked="" type="checkbox"/> General Other (specify) _____
Name of Federal Candidate F94.000002	Office Sought: House Senate President	State: District:	Disbursement/Obligation For: Primary General Other (specify) _____
Name of Federal Candidate	Office Sought: House Senate President	State: District:	Disbursement/Obligation For: Primary General Other (specify) _____

SUBTOTAL of Disbursement/Obligation This Page (optional)	60675.00
TOTAL This Period (last page this line number only) (carry total from last page to line 10)	60675.00

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
 The FEC added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> USPS First Class Mail	Postmarked
<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
<input type="checkbox"/> USPS Priority Mail	Postmarked
Delivery Confirmation™ or Signature Confirmation™ Label <input type="checkbox"/>	
<input type="checkbox"/> USPS Express Mail	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
Next Business Day Delivery <input type="checkbox"/>	
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input checked="" type="checkbox"/> Other (Specify): <i>Webform #329</i>	Date of Receipt or Postmarked <i>10/23/08</i>

[Signature]
 PREPARER

10/23/08
 DATE PREPARED

28039890588